

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

TOM MACARTHUR FOR CONGRESS INC.

ADDRESS (number and street) ▼

PO Box 225



Check if different than previously reported. (ACC)

Colonia

NJ

07067-0225

2. FEC IDENTIFICATION NUMBER ▼

C C00557520

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

NJ

03

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y  
11 / 08 / 2016

in the State of

NJ

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y  
04 / 01 / 2016

through

M M / D D / Y Y Y Y  
05 / 18 / 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Ronald Gravino

Signature of Treasurer

Ronald Gravino

[Electronically Filed]

Date

M M / D D / Y Y Y Y  
05 / 26 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3**  
(Revised 02/2003)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 66

Write or Type Committee Name

**TOM MACARTHUR FOR CONGRESS INC.**

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	8		2	0	1	6

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	99066.00	1029927.13
(b) Total Contribution Refunds (from Line 20(d)) .....	25.00	325.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	99041.00	1029602.13
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	93729.61	898181.32
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	534.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	93729.61	897647.32
8. Cash on Hand at Close of Reporting Period (from Line 27).....	404085.05	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	506230.56	

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 66

Write or Type Committee Name

**TOM MACARTHUR FOR CONGRESS INC.**

Report Covering the Period:

From:

M M / D D / Y Y Y Y  
04 / 01 / 2016

To:

M M / D D / Y Y Y Y  
05 / 18 / 2016

**I. RECEIPTS**
**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date
**11. CONTRIBUTIONS (other than loans) FROM:****(a) Individuals/Persons Other Than Political Committees****(i) Itemized (use Schedule A).....**

58663.00

448676.83

**(ii) Unitemized.....**

603.00

24928.16

**(iii) TOTAL of contributions from individuals ▶**

59266.00

473604.99

**(b) Political Party Committees.....**

0.00

0.00

**(c) Other Political Committees (such as PACs).....**

39800.00

556322.14

**(d) The Candidate.....**

0.00

0.00

**(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..**

99066.00

1029927.13

**12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....**

0.00

1250.00

**13. LOANS:****(a) Made or Guaranteed by the Candidate.....**

0.00

0.00

**(b) All Other Loans.....**

0.00

0.00

**(c) TOTAL LOANS (add Lines 13(a) and (b)).....**

0.00

0.00

**14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....**

0.00

534.00

**15. OTHER RECEIPTS (Dividends, Interest, etc.) .....**

0.00

25953.53

**16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶**

99066.00

1057664.66

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 66

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	93729.61	898181.32
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	25.00	325.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	25.00	325.00
21. OTHER DISBURSEMENTS .....	335.00	86450.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	94089.61	984956.32

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	399108.66
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	99066.00
25. SUBTOTAL (add Line 23 and Line 24).....	498174.66
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	94089.61
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	404085.05

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 5 OF 66

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**TOM MACARTHUR FOR CONGRESS INC.**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Steven F Fishman</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 12 / 2016	
Mailing Address 1617 JFK Blvd Ste 545		<b>Transaction ID : A2C719A12C30F4A47A07</b>	
City Philadelphia	State PA	Zip Code 19103-1858	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Zac Management Group LLC	Occupation Managing Member		<input type="checkbox"/> Memo Item
Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General Debt	Election Cycle-to-Date 5900.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Patrick A Nehme</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 12 / 2016	
Mailing Address 57-56 256th St		<b>Transaction ID : A26ABC1CD26054E2D8DA</b>	
City Little Neck	State NY	Zip Code 11362-2141	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Patrick A Nehme	Occupation Consultant		<input type="checkbox"/> Memo Item
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>Sam Shamie</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 18 / 2016	
Mailing Address 39 Colin Pl		<b>Transaction ID : ADB622A01EE6948BF90C</b>	
City Brooklyn	State NY	Zip Code 11223-2825	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Delta Enterprise	Occupation President		<input type="checkbox"/> Memo Item
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....		1500.00	
<b>TOTAL</b> This Period (last page this line number only).....			

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)  
**TOM MACARTHUR FOR CONGRESS INC.**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Bernard M Flynn</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 09 / 2016	
Mailing Address 274 Burning Tree Rd		<b>Transaction ID : AEF3CCB7F9F47465E861</b>	
City Delran	State NJ	Zip Code 08075-1913	Amount of Each Receipt this Period _____ 500.00
FEC ID number of contributing federal political committee. C _____		<input type="checkbox"/> Memo Item	
Name of Employer NJM Insurance Group	Occupation President/CEO		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Deborah L Clement</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 28 / 2016	
Mailing Address 2837 Lenox St		<b>Transaction ID : ABF726A9B8BC0468DA46</b>	
City Toms River	State NJ	Zip Code 08755-2550	Amount of Each Receipt this Period _____ 400.00
FEC ID number of contributing federal political committee. C _____		<input type="checkbox"/> Memo Item	
Name of Employer Toms River Municipal Utilities Authori	Occupation Commissioner		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 400.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>William Mino</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 13 / 2016	
Mailing Address 5 Morey Ln		<b>Transaction ID : A1D4B15977C854198963</b>	
City Randolph	State NJ	Zip Code 07869	Amount of Each Receipt this Period _____ 500.00
FEC ID number of contributing federal political committee. C _____		<input type="checkbox"/> Memo Item	
Name of Employer Information Requested	Occupation Information Requested		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 600.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....		_____ 1400.00	
<b>TOTAL</b> This Period (last page this line number only).....		_____	

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)  
**TOM MACARTHUR FOR CONGRESS INC.**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>John Stanzi</b>			Date of Receipt M M / D D / Y Y Y Y 05 / 12 / 2016		
Mailing Address 1537 Brandon Rd			<b>Transaction ID : A5790953C01B247CEADD</b>		
City Glenview	State IL	Zip Code 60025	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item			
Name of Employer One Call Managed Care		Occupation Operator			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00			
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Carl Schmidt</b>			Date of Receipt M M / D D / Y Y Y Y 04 / 18 / 2016		
Mailing Address 56 Wave St			<b>Transaction ID : AD9C0D7475865427582D</b>		
City Beachwood	State NJ	Zip Code 08722	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item			
Name of Employer Retired		Occupation Retired			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 300.00			
<b>C.</b> Full Name (Last, First, Middle Initial) <b>John J Murray</b>			Date of Receipt M M / D D / Y Y Y Y 05 / 04 / 2016		
Mailing Address 21 E Black Horse Pike			<b>Transaction ID : A221784D020CA431F88D</b>		
City Pleasantville	State NJ	Zip Code 08232-2759	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item			
Name of Employer Murray & Becker LLC		Occupation CPA			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00			
<b>SUBTOTAL</b> of Receipts This Page (optional).....			800.00		
<b>TOTAL</b> This Period (last page this line number only).....					

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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Detailed Summary PageFOR LINE NUMBER:  
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**TOM MACARTHUR FOR CONGRESS INC.**

Full Name (Last, First, Middle Initial)

**A. Maryann Schmid**

Mailing Address 100 D Long Beach Blvd

City

North Beach

State

NJ

Zip Code

08008

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Linen &amp; Home Furnishing Boutique

Occupation

Interior Designer

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1231.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		02		2016

Transaction ID : AE6C6E639E9FB442BB5E

Amount of Each Receipt this Period

481.50

☐ Memo Item  
 In-kind: Food/Beverage

Full Name (Last, First, Middle Initial)

**B. J Lindsay Fuller**

Mailing Address 576 Sentinel Rd

City

Moorestown

State

NJ

Zip Code

08057-2130

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self Employed

Occupation

Employee Benefits Securities

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		18		2016

Transaction ID : AB27F6A5FB07F4CD19F8

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Bela Szigethy**Mailing Address 2109 Broadway  
Apt 1616

City

New York

State

NY

Zip Code

10023

FEC ID number of contributing  
federal political committee.

C

Name of Employer

The Riverside Company

Occupation

Co-CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		18		2016

Transaction ID : A249F635731304F55AAC

Amount of Each Receipt this Period

2700.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

3231.50



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**TOM MACARTHUR FOR CONGRESS INC.**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Douglas Hitchner</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>05</td> <td></td> <td>09</td> <td></td> <td>2016</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	05		09		2016
M M M	/	D D D	/	Y Y Y Y Y Y									
05		09		2016									
Mailing Address 146 Central Park W Apt 2F		<b>Transaction ID : AFDF756EAC4C849BAA8B</b>											
City New York	State NY	Zip Code 10023											
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1"> <tr> <td>500.00</td> </tr> </table>		500.00									
500.00													
Name of Employer Odyssey Investment Partners	Occupation Managing Principal	<input type="checkbox"/> Memo Item											
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td>500.00</td> </tr> </table>	500.00											
500.00													

  

<b>B.</b> Full Name (Last, First, Middle Initial) <b>Anthony Zingarelli</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>05</td> <td></td> <td>18</td> <td></td> <td>2016</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	05		18		2016
M M M	/	D D D	/	Y Y Y Y Y Y									
05		18		2016									
Mailing Address 1617 JFK Blvd Unit 545		<b>Transaction ID : A7C9C3226653B4BC0A0B</b>											
City Philadelphia	State PA	Zip Code 19103-1858											
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1"> <tr> <td>500.00</td> </tr> </table>		500.00									
500.00													
Name of Employer Zac Management Group LLC	Occupation Executive	<input type="checkbox"/> Memo Item											
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td>500.00</td> </tr> </table>	500.00											
500.00													

  

<b>C.</b> Full Name (Last, First, Middle Initial) <b>Kathleen A McQuaid</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>05</td> <td></td> <td>09</td> <td></td> <td>2016</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	05		09		2016
M M M	/	D D D	/	Y Y Y Y Y Y									
05		09		2016									
Mailing Address 614 Nugentown Rd		<b>Transaction ID : A2CD16E7870C54970888</b>											
City Little Egg Harbor	State NJ	Zip Code 08087-3900											
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1"> <tr> <td>500.00</td> </tr> </table>		500.00									
500.00													
Name of Employer Sea/Cure Moving	Occupation Director of Accounting	<input type="checkbox"/> Memo Item											
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td>500.00</td> </tr> </table>	500.00											
500.00													

  

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<table border="1"> <tr> <td>1500.00</td> </tr> </table>	1500.00
1500.00		
<b>TOTAL</b> This Period (last page this line number only).....	<table border="1"> <tr> <td></td> </tr> </table>	

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 10 OF 66

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

TOM MACARTHUR FOR CONGRESS INC.

Full Name (Last, First, Middle Initial)

Richard Gray

Mailing Address 800 S Pointe Dr

#804

City

Miami Beach

State

FL

Zip Code

33139-7169

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RGA Advisors Inc

Occupation

CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		04		2016

Transaction ID : AC61EB2AF449C49F487C

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Philip Cowen

Mailing Address 580 Park Ave

City

New York

State

NY

Zip Code

10065-7313

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Philip Cowen

Occupation

Investro

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2016

Transaction ID : A015F5F52C9934D36821

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Neil L Rock

Mailing Address 201 E 80th St

Apt 20A

City

New York

State

NY

Zip Code

10075-0517

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Skadden Arps Slate et al

Occupation

Attorney

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2016

Transaction ID : A6EB367A506044FDF960

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2000.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**TOM MACARTHUR FOR CONGRESS INC.**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Lawrence Hesse</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 22 / 2016	
Mailing Address 357 W Lake Ave		<b>Transaction ID : AF166DA282DF24BD68EC</b>	
City Bay Head	State NJ	Zip Code 08742	Amount of Each Receipt this Period 2000.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item	
Name of Employer CJ Hesse	Occupation President		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>John N Thrunk</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 22 / 2016	
Mailing Address 516 Pirate Ln		<b>Transaction ID : A6216EF8D18DF49F293F</b>	
City Manahawkin	State NJ	Zip Code 08050-2133	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item	
Name of Employer Coastal Cushion	Occupation Upholsterer		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>Tracy Sipprelle</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 04 / 2016	
Mailing Address 81 Chambers St		<b>Transaction ID : A4B34CB49A8A34A7CAB7</b>	
City Princeton	State NJ	Zip Code 08542-3738	Amount of Each Receipt this Period 2700.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item	
Name of Employer Homemaker	Occupation Homemaker		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....		5200.00	
<b>TOTAL</b> This Period (last page this line number only).....			

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**TOM MACARTHUR FOR CONGRESS INC.**

Full Name (Last, First, Middle Initial)

**Laurence M Downes**

Mailing Address 1 Stuart Ln E

City

Princeton Jct

State

NJ

Zip Code

08550-1846

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information RequestedOccupation  
Information Requested

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

4450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		09		2016

Transaction ID : A394237C05E5E43C8A46

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**Ira Ganger**

Mailing Address 34 Herrick Dr

City

Lawrence

State

NY

Zip Code

11559

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AmerexOccupation  
Owner

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		28		2016

Transaction ID : AD45CCF8C782146D19FE

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**Leonardo BT Simoes**Mailing Address 380 Route 9W  
Apt 4

City

Sparkill

State

NY

Zip Code

10976-1306

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Elite Smart GroupOccupation  
CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		28		2016

Transaction ID : AE48A5B144EFE4361B1E

Amount of Each Receipt this Period

500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1500.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**TOM MACARTHUR FOR CONGRESS INC.**

Full Name (Last, First, Middle Initial) <b>A. Mustafa Ozkul</b>		Date of Receipt <div> <div>M M / D D / Y Y Y Y</div> <div>05 / 09 / 2016</div> </div>
Mailing Address 1020 Woodlane Rd Apt 112		Transaction ID : <b>AF3DAD59A35DA42C284B</b>
City Beverly	State NJ	
Zip Code 08010-3206		Amount of Each Receipt this Period <div> <div></div> <div>500.00</div> </div>
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer Giresunlular Dernegi	Occupation Consultant	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div> <div></div> <div>500.00</div> </div>	

Full Name (Last, First, Middle Initial) <b>B. Patricia Browne</b>		Date of Receipt <div> <div>M M / D D / Y Y Y Y</div> <div>05 / 04 / 2016</div> </div>
Mailing Address 559 Atsion Rd		Transaction ID : <b>AAF3F17E62C934D88939</b>
City Shamong	State NJ	
Zip Code 08088		Amount of Each Receipt this Period <div> <div></div> <div>250.00</div> </div>
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer Children's Hospital of Phila.	Occupation Physician	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div> <div></div> <div>850.00</div> </div>	

Full Name (Last, First, Middle Initial) <b>C. Frances Lefkowitz</b>		Date of Receipt <div> <div>M M / D D / Y Y Y Y</div> <div>05 / 09 / 2016</div> </div>
Mailing Address 5 Azalea Dr		Transaction ID : <b>A753BE308B35248578DA</b>
City Lumberton	State NJ	
Zip Code 08048-5239		Amount of Each Receipt this Period <div> <div></div> <div>500.00</div> </div>
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer Homemaker	Occupation Homemaker	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div> <div></div> <div>500.00</div> </div>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<div> <div></div> <div>1250.00</div> </div>
<b>TOTAL</b> This Period (last page this line number only) .....	<div> <div></div> </div>

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**TOM MACARTHUR FOR CONGRESS INC.**

Full Name (Last, First, Middle Initial)

**Richard Hammer**

Mailing Address PO Box 1125

City

Brentwood

State

TN

Zip Code

37024-1125

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Brentwood Services IncOccupation  
President/CEO

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		09		2016

Transaction ID : A432896D39FCB40ED9D8

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**John Giouroukakis**

Mailing Address 182 Mill Spring Rd

City

Manhasset

State

NY

Zip Code

11030

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Latham & Watkins LLPOccupation  
Lawyer

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2016

Transaction ID : AFCCC3D085F2D4576BE0

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**James C Boakes**

Mailing Address 74 Oak Crest Ln

City

Westampton

State

NJ

Zip Code

08060-5738

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		28		2016

Transaction ID : A54C1B163588B4FE7B4D

Amount of Each Receipt this Period

100.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1600.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**TOM MACARTHUR FOR CONGRESS INC.**

Full Name (Last, First, Middle Initial)

**Lonnie Davis**

Mailing Address 16 Candace Ct

City

Richboro

State

PA

Zip Code

18954-1075

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CBIZ MHM LLC

Occupation

CPA

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		18		2016

Transaction ID : A5789DC5DB98A476F82A

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**Anthony G Greco**

Mailing Address 14 Hazelton Ct

City

Manahawkin

State

NJ

Zip Code

08050-2793

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Greco Jewelers &amp; Clock Shop

Occupation

Owner

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		22		2016

Transaction ID : A7083F5C6C667409FA02

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**John T Lutz**

Mailing Address 862 Scioto Dr

City

Franklin Lakes

State

NJ

Zip Code

07417-2822

FEC ID number of contributing  
federal political committee.

C

Name of Employer

McDermott Will &amp; Emery

Occupation

Attorney

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		13		2016

Transaction ID : AE14450AC2DDD4F6FA41

Amount of Each Receipt this Period

500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

2000.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**TOM MACARTHUR FOR CONGRESS INC.**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Fangcheng Liang</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 15 / 2016	
Mailing Address 319 Franklin Ave Unit 112		<b>Transaction ID : A4234E9650CF54B4399F</b>	
City Wyckoff	State NJ	Zip Code 07481-2068	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00	
Name of Employer Aoyamanj	Occupation Owner		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Jeffrey McKibben</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 09 / 2016	
Mailing Address 49 E 21st St Apt 7B		<b>Transaction ID : ADE446FA5AE44436A9DC</b>	
City New York	State NY	Zip Code 10010	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00	
Name of Employer Odyssey Investment Partners	Occupation Managing Partner		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>William Luby</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 09 / 2016	
Mailing Address 179 Bingham Ave		<b>Transaction ID : A240935C2BDD245648ED</b>	
City Rumson	State NJ	Zip Code 07760-1836	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Seaport Capital	Occupation Investor		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....		5700.00	
<b>TOTAL</b> This Period (last page this line number only).....			



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**TOM MACARTHUR FOR CONGRESS INC.**

Full Name (Last, First, Middle Initial)

**Andrew Lawrence**

Mailing Address 784 Park Ave

City

New York

State

NY

Zip Code

10021-3553

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		28		2016

Transaction ID : A107A22A2C67E4F97B7D

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**Richard Schmid**

Mailing Address 100 D Long Beach Blvd

City

North Beach

State

NJ

Zip Code

08008

FEC ID number of contributing  
federal political committee.

C

Name of Employer

The Dutchman's Brauhaus

Occupation

General Manager

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

731.50

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		02		2016

Transaction ID : AE308617982AF4CCD983

Amount of Each Receipt this Period

481.50

☐ Memo Item

In-kind:Food/Beverage

Full Name (Last, First, Middle Initial)

**David Panico**

Mailing Address 24 N Hillside Ave

City

Chatham

State

NJ

Zip Code

07928

FEC ID number of contributing  
federal political committee.

C

Name of Employer

York Risk Services

Occupation

VP IT

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		28		2016

Transaction ID : A4B17F93ED9B44B69AC7

Amount of Each Receipt this Period

100.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

831.50

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

TOM MACARTHUR FOR CONGRESS INC.

Full Name (Last, First, Middle Initial)

John Giouroukakis

Mailing Address 182 Mill Spring Rd

City

Manhasset

State

NY

Zip Code

11030

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Latham &amp; Watkins LLP

Occupation

Lawyer

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2016

Transaction ID : A26FCCE3606344AF894B

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Joseph Shamie

Mailing Address 35 Colin Pl

City

Brooklyn

State

NJ

Zip Code

11223

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Delta Enterprises

Occupation

President

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		12		2016

Transaction ID : A63097EA76E8F4A4AB8A

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Philip Fine

Mailing Address 4 Summit Terr N

City

Kinnelon

State

NJ

Zip Code

07405

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Vistage International

Occupation

Managing Partner

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		26		2016

Transaction ID : AC9EEAF0EEA2149E9BDE

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1250.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**TOM MACARTHUR FOR CONGRESS INC.**

Full Name (Last, First, Middle Initial)

**Manuel Stamatakis**

Mailing Address 1111 W DeKalb Pike

City

Wayne

State

PA

Zip Code

19087-2180

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Capital Management Enterprises

Occupation

CEO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		18		2016

Transaction ID : A22F17CD038D947248E7

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**Bradd Williamson**

Mailing Address 10 Schermerhorn St

City

Brooklyn

State

NY

Zip Code

11201

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Latham &amp; Watkins LLP

Occupation

Partner

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		28		2016

Transaction ID : A51E6CF982BF24D6CBB7

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**Jamie Nadeau**Mailing Address 1617 JFK Blvd  
Ste 545

City

Philadelphia

State

PA

Zip Code

19103-1858

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Lauren James Events

Occupation

Partner

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		12		2016

Transaction ID : AF459A6931D93481DB72

Amount of Each Receipt this Period

500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

2000.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)

**TOM MACARTHUR FOR CONGRESS INC.**

Full Name (Last, First, Middle Initial)

**Brian S O'Neill**

Mailing Address 877 Brunswick Ave

City

Trenton

State

NJ

Zip Code

08638-3834

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
O'Neill & Associates

Occupation  
Insurance Sales

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 26 / 2016

Transaction ID : ABDE60A15FFF240CBBBB

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**TJ Nelligan**

Mailing Address 2 Constitution Ct  
PH1

City

Hoboken

State

NJ

Zip Code

07030-6769

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Nelligan Group LLC

Occupation  
Owner

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 13 / 2016

Transaction ID : A3B8F42ADF5D74A63939

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**Diane Kaunitz**

Mailing Address 757 Stepping Stone Ct

City

Toms River

State

NJ

Zip Code

08753

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Specialty Systems

Occupation  
Owner

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 13 / 2016

Transaction ID : A4FD264AE7D2C4542B5F

Amount of Each Receipt this Period

500.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1250.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**TOM MACARTHUR FOR CONGRESS INC.**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Laurence Lynch</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 13 / 2016	
Mailing Address 217 Woodbury Rd Unit 375		<b>Transaction ID : A8F303930AEFA438F8D2</b>	
City	State	Zip Code	
Woodbury	NY	11797-6015	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 500.00	
Name of Employer Information Requested		Occupation Information Requested	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00	
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Howard Shlafmitz</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 12 / 2016	
Mailing Address 3 Hillside Ave		<b>Transaction ID : ACD2EADD0236C4A799E0</b>	
City	State	Zip Code	
Port Washington	NY	11050-2723	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 500.00	
Name of Employer Masterpiece Printers		Occupation Businessman	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00	
<b>C.</b> Full Name (Last, First, Middle Initial) <b>Edward Falkenberg</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 28 / 2016	
Mailing Address PO Box 207		<b>Transaction ID : A82BB26A3AB2F43E1920</b>	
City	State	Zip Code	
Scarsdale	NY	10583	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 500.00	
Name of Employer Retired		Occupation Retired	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00	
<b>SUBTOTAL</b> of Receipts This Page (optional).....		1500.00	
<b>TOTAL</b> This Period (last page this line number only).....			

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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NAME OF COMMITTEE (In Full)  
**TOM MACARTHUR FOR CONGRESS INC.**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Vincent Tufariello</b>			Date of Receipt M M / D D / Y Y Y Y 05 / 13 / 2016	
Mailing Address 30 Old Farm Rd			<b>Transaction ID : A2B21E4BB7CE44260A9F</b>	
City	State	Zip Code		
Basking Ridge	NJ	07920-3309		
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period 500.00	
Name of Employer Atrium Health & Sr Living		Occupation Director	<input type="checkbox"/> Memo Item	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Graham Hearn</b>			Date of Receipt M M / D D / Y Y Y Y 05 / 18 / 2016	
Mailing Address 2973 Montgomery Rd			<b>Transaction ID : AD9A923197B6A41909BB</b>	
City	State	Zip Code		
Shaker Heights	OH	44122-2828		
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period 500.00	
Name of Employer The Riverside Company		Occupation Private Equity	<input type="checkbox"/> Memo Item	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>George J Chowanec</b>			Date of Receipt M M / D D / Y Y Y Y 04 / 28 / 2016	
Mailing Address 1347 Laurel Blvd			<b>Transaction ID : ADA58BAC4B9F84479B6B</b>	
City	State	Zip Code		
Lanoka Harbor	NJ	08734-2913		
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period 250.00	
Name of Employer All About Closets		Occupation Owner	<input type="checkbox"/> Memo Item	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....			1250.00	
<b>TOTAL</b> This Period (last page this line number only).....				

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**TOM MACARTHUR FOR CONGRESS INC.**

Full Name (Last, First, Middle Initial)

**Jan A Nissen**

Mailing Address 14B Long Beach Blvd

City

Long Beach Townshi

State

NJ

Zip Code

08008-6142

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Nissen Fire Protect

Occupation

Owner

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		09		2016

Transaction ID : AFBC71233F00542F8A78

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**Scott Sipprelle**

Mailing Address 81 Chambers St

City

Princeton

State

NJ

Zip Code

08542-3738

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Westland Ventures LLC

Occupation

Investments

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		04		2016

Transaction ID : A39F245AD3C504A3EA34

Amount of Each Receipt this Period

2700.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**Alan E Morrison**Mailing Address 23 S 23rd St  
#5F

City

Philadelphia

State

PA

Zip Code

19103-3028

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Trident USA Health Services

Occupation

Executive

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2016

Transaction ID : AFBF441413167451496D

Amount of Each Receipt this Period

500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

3700.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**TOM MACARTHUR FOR CONGRESS INC.**

Full Name (Last, First, Middle Initial)

**Seth Zuckerman**

Mailing Address 20 Castle Ct

City

Randolph

State

NJ

Zip Code

07869-2023

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Greenberg Traurig LLPOccupation  
Attorney

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		13		2016

Transaction ID : A4C23746800B34526960

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**Joseph Lattanzi**

Mailing Address 11302 Beach Ave

City

Long Beach Twp

State

NJ

Zip Code

08008

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Joseph P LattanziOccupation  
Physician

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		09		2016

Transaction ID : AEFB0E9439E9A4B5BBC2

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**Freeman Zausner**

Mailing Address PO Box 728

City

Waldoboro

State

ME

Zip Code

04572

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		15		2016

Transaction ID : AC1A069675FE14F31A5F

Amount of Each Receipt this Period

500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1500.00



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
**TOM MACARTHUR FOR CONGRESS INC.**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Michael G Crofton</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 07 / 2016	
Mailing Address 1740 E Willow Grove Ave		<b>Transaction ID : A0363678942E84251ACF</b>	
City Glenside	State PA	Zip Code 19038-7262	Amount of Each Receipt this Period 2000.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item	
Name of Employer Philadelphia Trust Company	Occupation President		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Robert F Kennedy</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 04 / 2016	
Mailing Address 246 West End Ave #10C		<b>Transaction ID : AD92CEBA4E02B483C8AB</b>	
City New York	State NY	Zip Code 10023-3623	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item	
Name of Employer Milbank Tweed et al	Occupation Attorney		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>Priscilla Debarros</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 12 / 2016	
Mailing Address 1617 JFK Blvd Ste 545		<b>Transaction ID : A7AE762AC5B0A4DA08B7</b>	
City Philadelphia	State PA	Zip Code 19103-1858	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item	
Name of Employer ZAC Management Group	Occupation Administrator		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....		3000.00	
<b>TOTAL</b> This Period (last page this line number only).....			

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**TOM MACARTHUR FOR CONGRESS INC.**

Full Name (Last, First, Middle Initial) <b>Kevin P Breslin</b>		Date of Receipt <div> <div>M M / D D / Y Y Y Y</div> <div>05 / 13 / 2016</div> </div>
Mailing Address 2 Consitution Ct PH 2		Transaction ID : <b>A0B96350DBD7B40929E3</b>
City Hoboken	State NJ	
Zip Code 07030-6769		Amount of Each Receipt this Period <div> <div></div> <div>500.00</div> </div>
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer KBWB Operations LLC	Occupation Healthcare Owner	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div> <div></div> <div>2500.00</div> </div>	

Full Name (Last, First, Middle Initial) <b>Anthony A DeMarco</b>		Date of Receipt <div> <div>M M / D D / Y Y Y Y</div> <div>04 / 12 / 2016</div> </div>
Mailing Address 7 Brookview Ct		Transaction ID : <b>A98FA473EAA19455C94F</b>
City Voorhees	State NJ	
Zip Code 08043-4204		Amount of Each Receipt this Period <div> <div></div> <div>1000.00</div> </div>
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer PRICE Systems LLC	Occupation President	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div> <div></div> <div>1000.00</div> </div>	

Full Name (Last, First, Middle Initial) <b>Douglas Hendrickson</b>		Date of Receipt <div> <div>M M / D D / Y Y Y Y</div> <div>05 / 11 / 2016</div> </div>
Mailing Address 60 E 96th St Apt 6-A		Transaction ID : <b>A7A5B47CA0EBA4108BBB</b>
City New York	State NY	
Zip Code 10128		Amount of Each Receipt this Period <div> <div></div> <div>2150.00</div> </div>
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer MidCap Advisors	Occupation Banker	In-kind: Food/Beverage
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div> <div></div> <div>2150.00</div> </div>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<div> <div></div> <div>3650.00</div> </div>
<b>TOTAL</b> This Period (last page this line number only) .....	<div> <div></div> </div>

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

TOM MACARTHUR FOR CONGRESS INC.

Full Name (Last, First, Middle Initial)

James Toth

A.

Mailing Address 117 W 87th St

Apt 2

City

New York

State

NY

Zip Code

10024-2927

FEC ID number of contributing  
federal political committee.

C

Name of Employer

The Riverside Company

Occupation

Finance

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		26		2016

Transaction ID : ABAF4776C09B5444E8FF

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Carl Schmidt

B.

Mailing Address 56 Wave St

City

Beachwood

State

NJ

Zip Code

08722

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		18		2016

Transaction ID : A3DE24838876248E682D

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Kristine Larson-Panacek

C.

Mailing Address PO Box 787

City

Barnegat Light

State

NJ

Zip Code

08006

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Viking Fresh off the Hook

Occupation

Owner

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		09		2016

Transaction ID : A3D32B2AB9B8B413B9EB

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

800.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
**TOM MACARTHUR FOR CONGRESS INC.**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>John Kulin</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 26 / 2016	
Mailing Address 118 N Vienna Ave		<b>Transaction ID : AA8B04DDDF2E0422BA71</b>	
City Egg Harbor City	State NJ	Zip Code 08215-3243	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item	
Name of Employer The Urgent Care Group PA	Occupation Physician		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Sharon Manner</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 15 / 2016	
Mailing Address 47 Fairview Ave		<b>Transaction ID : A74342EB507564FE59C3</b>	
City Madison	State NJ	Zip Code 07940-1319	Amount of Each Receipt this Period 2700.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item	
Name of Employer Ashrams for Autism	Occupation Co-Founder		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>Babu Metgud</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 13 / 2016	
Mailing Address 4201 Church Rd Unit 1		<b>Transaction ID : A7D8D180C8B4041D6B93</b>	
City Mt Laurel	State NJ	Zip Code 08054	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item	
Name of Employer Innovation Technology	Occupation President		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1035.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....		3450.00	
<b>TOTAL</b> This Period (last page this line number only).....			

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

TOM MACARTHUR FOR CONGRESS INC.

Full Name (Last, First, Middle Initial)

A. David Feinberg

Mailing Address 126 E 56th St

32nd Fl

City

New York

State

NY

Zip Code

10022

FEC ID number of contributing  
federal political committee.

C

Name of Employer

David Feinberg

Occupation

Real Estate

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		22		2016

Transaction ID : AE33C2F7AECA540E69C5

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Lisa G Lopez

Mailing Address 263 S William Cook Blvd

City

Manahawkin

State

NJ

Zip Code

08050-3667

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Home Alliance Realty

Occupation

Real Estate

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		09		2016

Transaction ID : A8E59D15D024440E2807

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Roger W Dinella

Mailing Address 2628 Broadway

Apt 6B

City

New York

State

NY

Zip Code

10025-5107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Starr Companies

Occupation

Director of Tax

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		28		2016

Transaction ID : A86A5276DDA85404B9C3

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1250.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

TOM MACARTHUR FOR CONGRESS INC.

Full Name (Last, First, Middle Initial)

J Lindsay Fuller

Mailing Address 576 Sentinel Rd

City

Moorestown

State

NJ

Zip Code

08057-2130

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self Employed

Occupation

Employee Benefits Securities

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

750.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		18		2016

Transaction ID : AFF6C1AFF8B454DF4BDB

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Ben Chouake

Mailing Address 245 Hutchinson Rd

City

Englewood

State

NJ

Zip Code

07631-4406

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Ben Chouake

Occupation

Physician

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		28		2016

Transaction ID : A8FD6C3E633524FEBBF5

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Earmarked (Non-Directed)

Full Name (Last, First, Middle Initial)

NORPAC

Mailing Address PO Box 1543

City

Englewood Cliffs

State

NJ

Zip Code

07632-0543

FEC ID number of contributing  
federal political committee.

C C00247403

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		28		2016

Transaction ID : A9E8543E56C57431D9E0

Amount of Each Receipt this Period

2000.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not affected.

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2050.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**TOM MACARTHUR FOR CONGRESS INC.**

Full Name (Last, First, Middle Initial) <b>A. Midcap Advisors Llc</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 13 / 2016
Mailing Address 1556 3rd Ave Ste 410		Transaction ID : AFE401CD06F554593A8B
City New York	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00
Name of Employer	Occupation	<input type="checkbox"/> Memo Item PARTNERSHIP
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500.00	

Full Name (Last, First, Middle Initial) <b>B. Douglas Hendrickson</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 13 / 2016
Mailing Address 60 E 96th St Apt 6-A		Transaction ID : A09399E6ECB81478D8CB
City New York	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00
Name of Employer MidCap Advisors	Occupation Banker	<input checked="" type="checkbox"/> Memo Item PARTNERSHIP
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3650.00	Partnership: Midcap Advisors Llc

Full Name (Last, First, Middle Initial) <b>C. Stradley Ronon Stevens &amp; Young LLP</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 19 / 2016
Mailing Address 2005 Market St Ste 2600		Transaction ID : A3D79D3449EBD49B0928
City Philadelphia	State PA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	<input type="checkbox"/> Memo Item PARTNERSHIP
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2500.00
<b>TOTAL</b> This Period (last page this line number only).....	

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)  
**TOM MACARTHUR FOR CONGRESS INC.**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>William R Sasso</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 19 / 2016	
Mailing Address 2005 Market St Ste 2600 City Philadelphia State PA Zip Code 19103-7018		<b>Transaction ID : A3B7F85067E034D00BD6</b>	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Stradley Ronon Stevens & Young LLP		Occupation Chairman	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00	
		<input checked="" type="checkbox"/> Memo Item PARTNERSHIP Partnership: Stradley Ronon Stevens & Young LLP	
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Michael Volpe Venable Llp</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 13 / 2016	
Mailing Address 1270 Avenue of the Americas FI 24 City New York State NY Zip Code 10020-1806		<b>Transaction ID : A04B87DF2C5DC4C74B72</b>	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer		Occupation	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00	
		<input type="checkbox"/> Memo Item PARTNERSHIP	
<b>C.</b> Full Name (Last, First, Middle Initial) <b>Michael Volpe</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 13 / 2016	
Mailing Address 1270 Avenue of the Americas FI 24 City New York State NY Zip Code 10020-1806		<b>Transaction ID : AC4527C0D9FBF4C2CBDC</b>	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Michael Volpe Venable Llp		Occupation Partner	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00	
		<input checked="" type="checkbox"/> Memo Item PARTNERSHIP Partnership: Michael Volpe Venable Llp	
<b>SUBTOTAL</b> of Receipts This Page (optional).....		500.00	
<b>TOTAL</b> This Period (last page this line number only).....			



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

TOM MACARTHUR FOR CONGRESS INC.

Full Name (Last, First, Middle Initial)

433 Associates Llc

Mailing Address 433 Atlantic City Blvd

City

Beachwood

State

NJ

Zip Code

08722-4003

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		09		2016

Transaction ID : A33DDF66E12394ECFAEE

Amount of Each Receipt this Period

500.00

☐ Memo Item  
 PARTNERSHIP

Full Name (Last, First, Middle Initial)

Frank Little

Mailing Address 443 Atlantic City Blvd

City

Beachwood

State

NJ

Zip Code

08722

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

443 Associates LLC

Engineer

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		09		2016

Transaction ID : A08343AA87C9743BEBD9

Amount of Each Receipt this Period

500.00

☒ Memo Item  
 PARTNERSHIP

Partnership: 433 Associates Llc

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

500.00

58663.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d  
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NAME OF COMMITTEE (In Full)  
**TOM MACARTHUR FOR CONGRESS INC.**

Full Name (Last, First, Middle Initial)

**Independence Blue Cross PAC**

Mailing Address 1901 Market St

City State Zip Code  
Philadelphia PA 19103-1480

FEC ID number of contributing  
federal political committee.

**C** C00450056

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

4700.00

Date of Receipt

M M / D D / Y Y Y Y  
04 26 2016

Transaction ID : AC4C231BEE7C547CBABD

Amount of Each Receipt this Period

2700.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**EXELON CORPORATION POLITICAL ACTION COMMITTEE (EXELON PAC)**

Mailing Address 101 CONSTITUTION AVENUE NW  
SUITE 400 EAST

City State Zip Code  
WASHINGTON DC 20001

FEC ID number of contributing  
federal political committee.

**C** C00141218

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

12700.00

Date of Receipt

M M / D D / Y Y Y Y  
04 26 2016

Transaction ID : A8A9DA71CE3F54DC38F8

Amount of Each Receipt this Period

3700.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**Winston & Strawn LLP PAC**

Mailing Address 1700 K St NW

City State Zip Code  
Washington DC 20006-3817

FEC ID number of contributing  
federal political committee.

**C** C00282921

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M / D D / Y Y Y Y  
05 18 2016

Transaction ID : A2718F5FB4D3244AD811

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

9100.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

**TOM MACARTHUR FOR CONGRESS INC.**

Full Name (Last, First, Middle Initial)

**A. Bristol-Myers Squibb Employee Political Advocacy Fund**

Mailing Address 801 Pennsylvania Ave NW

Ste 325

City

Washington

State

DC

Zip Code

20004-3634

FEC ID number of contributing  
federal political committee.

C

C00035675

Name of Employer

Occupation

Receipt For: 2016



Primary



General



Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
04 / 22 / 2016D D / Y Y Y Y Y Y  
22 / 2016Y Y Y Y Y Y  
2016

Transaction ID : AFAD52A821E54E3D860

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. United Transportation Union Political Action Committee**

Mailing Address 24950 Country Club Blvd

City

North Olmsted

State

OH

Zip Code

44070-5342

FEC ID number of contributing  
federal political committee.

C

C00001636

Name of Employer

Occupation

Receipt For: 2016



Primary



General



Other (specify)

Election Cycle-to-Date

5500.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 18 / 2016D D / Y Y Y Y Y Y  
18 / 2016Y Y Y Y Y Y  
2016

Transaction ID : AE42EA925536745E2ABD

Amount of Each Receipt this Period

1750.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Genesis Healthcare Inc PAC**

Mailing Address 101 E State St

City

Kennett Square

State

PA

Zip Code

19348-3109

FEC ID number of contributing  
federal political committee.

C

C00292094

Name of Employer

Occupation

Receipt For: 2016



Primary



General



Other (specify)

Election Cycle-to-Date

6500.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 13 / 2016D D / Y Y Y Y Y Y  
13 / 2016Y Y Y Y Y Y  
2016

Transaction ID : A4F68582B20F34F8A8A3

Amount of Each Receipt this Period

1500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....

4250.00

**TOTAL** This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**TOM MACARTHUR FOR CONGRESS INC.**

**A.** Full Name (Last, First, Middle Initial)  
**L-3 Communications Corp PAC**

Mailing Address 600 3rd Ave

City State Zip Code  
New York NY 10016-1901

FEC ID number of contributing federal political committee. **C** C00338087

Name of Employer Occupation

Receipt For: 2016  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date  
6500.00

Date of Receipt

M M / D D / Y Y Y Y  
05 10 2016

Transaction ID : AF455482315F04714B60

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**COZEN O'CONNOR POLITICAL ACTION COMMITTEE**

Mailing Address 1900 MARKET STREET

City State Zip Code  
PHILADELPHIA PA 19103

FEC ID number of contributing federal political committee. **C** C00312777

Name of Employer Occupation

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
3700.00

Date of Receipt

M M / D D / Y Y Y Y  
04 15 2016

Transaction ID : AADF55673FF644DACB4E

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Day & Zimmermann Inc Federal PAC**

Mailing Address 1500 Spring Garden St

City State Zip Code  
Philadelphia PA 19130-4067

FEC ID number of contributing federal political committee. **C** C00341271

Name of Employer Occupation

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt

M M / D D / Y Y Y Y  
04 15 2016

Transaction ID : AFD72F2C74B73433EA36

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

4700.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
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☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**TOM MACARTHUR FOR CONGRESS INC.**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>United Transportation Union Political Action Committee</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 18 / 2016	
Mailing Address 24950 Country Club Blvd		<b>Transaction ID : A582709EA4B864355949</b>	
City North Olmsted	State OH	Zip Code 44070-5342	Amount of Each Receipt this Period 750.00
FEC ID number of contributing federal political committee. C C00001636		<input type="checkbox"/> Memo Item	
Name of Employer	Occupation		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5500.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS POLITICAL ACTION COMMITTEE</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 18 / 2016	
Mailing Address 220 Leigh Farm Rd		<b>Transaction ID : AB3AB480206A14ACA97D</b>	
City Durham	State NC	Zip Code 27707-8110	Amount of Each Receipt this Period 4000.00
FEC ID number of contributing federal political committee. C C00077321		<input type="checkbox"/> Memo Item	
Name of Employer	Occupation		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 4000.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>Private Equity Growth Capital Council Political Action Committee</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 13 / 2016	
Mailing Address 950 F St NW Ste 550		<b>Transaction ID : AB331FAACA3FE4074BA7</b>	
City Washington	State DC	Zip Code 20004-1463	Amount of Each Receipt this Period 2500.00
FEC ID number of contributing federal political committee. C C00495002		<input type="checkbox"/> Memo Item	
Name of Employer	Occupation		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....		7250.00	
<b>TOTAL</b> This Period (last page this line number only).....			

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**TOM MACARTHUR FOR CONGRESS INC.**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>PH&amp;S Federal Pac</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 03 / 2016	
Mailing Address 3000 Two Logan Sq 18th & Arch Streets		<b>Transaction ID : A79560EEE12E04EA3BF2</b>	
City Philadelphia	State PA	Zip Code 19103-2799	
FEC ID number of contributing federal political committee. <b>C</b> C00279927		Amount of Each Receipt this Period 2500.00	
Name of Employer		Occupation	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2500.00	
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Operating Engineers Local 825 PAC</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 18 / 2016	
Mailing Address 65 Springfield Ave		<b>Transaction ID : A221CD92DC187474D8C6</b>	
City Springfield	State NJ	Zip Code 07081	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2500.00	
Name of Employer		Occupation	
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 7500.00	
<b>C.</b> Full Name (Last, First, Middle Initial) <b>THE BOEING COMPANY POLITICAL ACTION COMMITTEE</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 10 / 2016	
Mailing Address 1200 WILSON BLVD		<b>Transaction ID : AC2CA23910269479185D</b>	
City ARLINGTON	State VA	Zip Code 22209	
FEC ID number of contributing federal political committee. <b>C</b> C00142711		Amount of Each Receipt this Period 1000.00	
Name of Employer		Occupation	
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 6000.00	
<b>SUBTOTAL</b> of Receipts This Page (optional).....		6000.00	
<b>TOTAL</b> This Period (last page this line number only).....			

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

**TOM MACARTHUR FOR CONGRESS INC.**

Full Name (Last, First, Middle Initial)

**National Beer Wholesalers Association Pac**Mailing Address 1101 King St  
Ste 600

City	State	Zip Code
Alexandria	VA	22314-2965

FEC ID number of contributing  
federal political committee.**C** C00144766

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y
04 / 28 / 2016

**Transaction ID : AEBBEA6CE96994158916**

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**PROSPERITY ACTION INC.**

Mailing Address 320 First St

City	State	Zip Code
Alexandria	VA	22314-1508

FEC ID number of contributing  
federal political committee.**C** C00377689

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y
04 / 14 / 2016

**Transaction ID : A3DB1E731376F477BB2A**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**Pfizer PAC**

Mailing Address 235 E 42nd St

City	State	Zip Code
New York	NY	10017-5703

FEC ID number of contributing  
federal political committee.**C** C00016683

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
05 / 18 / 2016

**Transaction ID : A4038BBBB0D754CA9A4E**

Amount of Each Receipt this Period

1000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....

8500.00

**TOTAL** This Period (last page this line number only).....

39800.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 40 OF 66

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TOM MACARTHUR FOR CONGRESS INC.**

Full Name (Last, First, Middle Initial)

**A. Maryann Schmid**

Mailing Address 100 D Long Beach Blvd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		02		2016

City	State	Zip Code
North Beach	NJ	08008

Amount of Each Disbursement this Period

481.50
--------

Purpose of Disbursement  
In-kind: Food/BeverageCategory/  
Type☐ Memo Item

Transaction ID : BE6C6E639E9FB442BB5E

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Full Name (Last, First, Middle Initial)

**B. Richard Schmid**

Mailing Address 100 D Long Beach Blvd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		02		2016

City	State	Zip Code
North Beach	NJ	08008

Amount of Each Disbursement this Period

481.50
--------

Purpose of Disbursement  
In-kind: Food/BeverageCategory/  
Type☐ Memo Item

Transaction ID : BE308617982AF4CCD983

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Full Name (Last, First, Middle Initial)

**C. Douglas Hendrickson**Mailing Address 60 E 96th St  
Apt 6-A

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		11		2016

City	State	Zip Code
New York	NY	10128

Amount of Each Disbursement this Period

2150.00
---------

Purpose of Disbursement  
In-kind: Food/BeverageCategory/  
Type☐ Memo Item

Transaction ID : B7A5B47CA0EBA4108BBB

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3113.00



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TOM MACARTHUR FOR CONGRESS INC.**

Full Name (Last, First, Middle Initial)

**A. Paycycle**

Mailing Address 210 Portage Ave

City	State	Zip Code
Palo Alto	CA	94306

Purpose of Disbursement  
Payroll Taxes

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2016

Amount of Each Disbursement this Period

79.17

☐ Memo Item

Transaction ID : B2012B3B74C40430F982

**B. Ronald Gravino Consulting**

Mailing Address PO Box 225

City	State	Zip Code
Colonia	NJ	07067

Purpose of Disbursement  
Compliance

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2016

Amount of Each Disbursement this Period

3320.47

☐ Memo Item

Transaction ID : B5C848BAFEDC04DA8AAA

**C. Chris Griswold**

Mailing Address 9 East 5th St

City	State	Zip Code
Barnegat Light	NJ	08006

Purpose of Disbursement  
Payroll

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2016

Amount of Each Disbursement this Period

855.20

☐ Memo Item

Transaction ID : B39C86F2D1BE142EFAB6

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

4254.84

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TOM MACARTHUR FOR CONGRESS INC.**

Full Name (Last, First, Middle Initial)

**A. Harrison Neely**

Mailing Address 41 Sayre Dr

City	State	Zip Code
Princeton	NJ	08540

Purpose of Disbursement  
Payroll

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2016

Amount of Each Disbursement this Period

2127.84

☐ Memo Item

Transaction ID : B8F5AA9D65F124F14915

Full Name (Last, First, Middle Initial)

**B. Brittany Brinkman**

Mailing Address 1 Windsor Ct

City	State	Zip Code
Jackson	NJ	08527

Purpose of Disbursement  
Payroll

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2016

Amount of Each Disbursement this Period

219.11

☐ Memo Item

Transaction ID : BFFA2EC4E06854BDFB70

Full Name (Last, First, Middle Initial)

**C. Thomas Bonfonti**

Mailing Address 31 Barbara Ct

City	State	Zip Code
Waretown	NJ	08758

Purpose of Disbursement  
Payroll

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2016

Amount of Each Disbursement this Period

818.22

☐ Memo Item

Transaction ID : BD8E2A0E68C1946F7BF7

**SUBTOTAL** of Disbursements This Page (optional).....

3165.17

**TOTAL** This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 43 OF 66

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TOM MACARTHUR FOR CONGRESS INC.**

Full Name (Last, First, Middle Initial)

**A. Paycycle**

Mailing Address 210 Portage Ave

City	State	Zip Code
Palo Alto	CA	94306

Purpose of Disbursement  
Payroll Taxes

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		04		2016

Amount of Each Disbursement this Period

1247.71

☐ Memo Item

Transaction ID : B700F60FB8F294E1DA0C

**B. Paycycle**

Full Name (Last, First, Middle Initial)

Mailing Address 210 Portage Ave

City	State	Zip Code
Palo Alto	CA	94306

Purpose of Disbursement  
Payroll Taxes

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		04		2016

Amount of Each Disbursement this Period

706.87

☐ Memo Item

Transaction ID : B81FEC450C7BE45A99B8

**c. Turnkey Production LLC**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 122

City	State	Zip Code
Cedar Grove	NJ	07009-0122

Purpose of Disbursement  
Fundraising

003

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		07		2016

Amount of Each Disbursement this Period

7794.58

☐ Memo Item

Transaction ID : B2434F019D793412E90E

**SUBTOTAL** of Disbursements This Page (optional).....

9749.16

**TOTAL** This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 44 OF 66

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TOM MACARTHUR FOR CONGRESS INC.**

Full Name (Last, First, Middle Initial)

**A. Maria I Diesel**

Mailing Address 1533 Johnnys Way

City	State	Zip Code
West Chester	PA	19382-7851

Purpose of Disbursement  
Travel

002

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		07		2016

Amount of Each Disbursement this Period

155.00

☐ Memo Item

Transaction ID : BF0797559538F4BF39F7

Full Name (Last, First, Middle Initial)

**B. The Prosper Group**Mailing Address 435 E Main St  
Room 250

City	State	Zip Code
Greenwood	IN	46143

Purpose of Disbursement  
Email Service

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		08		2016

Amount of Each Disbursement this Period

117.73

☐ Memo Item

Transaction ID : B12054FF4748145068FC

Full Name (Last, First, Middle Initial)

**c. Chris Russell Consulting**Mailing Address 1704 Maxwell Dr  
Ste 202

City	State	Zip Code
Wall	NJ	07719

Purpose of Disbursement  
Political Strategy Consulting

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		12		2016

Amount of Each Disbursement this Period

14380.00

☐ Memo Item

Transaction ID : BB84FC6A4A04B43BF914

**SUBTOTAL** of Disbursements This Page (optional).....

14652.73

**TOTAL** This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 45 OF 66

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TOM MACARTHUR FOR CONGRESS INC.**

Full Name (Last, First, Middle Initial)

**A. AP Intego**Mailing Address 144 North Rd  
Ste 2050

City Sudbury State MA Zip Code 01776

Purpose of Disbursement  
Insurance

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
04	12	2016

Amount of Each Disbursement this Period

50.04

☐ Memo Item

Transaction ID : BDC3C0E75092C44E88EE

**B. Transxt**Mailing Address 190 Monroe NW  
5th Fl

City Grand Rapids State MI Zip Code 49503

Purpose of Disbursement  
CC Processing Fee

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
04	13	2016

Amount of Each Disbursement this Period

68.54

☐ Memo Item

Transaction ID : B4C715229E84040E6929

**c. TD Bank**

Mailing Address 1398 Highway 9

City Old Bridge State NJ Zip Code 08857

Purpose of Disbursement  
Bank Fee

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
04	15	2016

Amount of Each Disbursement this Period

59.50

☐ Memo Item

Transaction ID : BB5AC78B109484A62BB5

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

178.08

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 46 OF 66

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TOM MACARTHUR FOR CONGRESS INC.**

Full Name (Last, First, Middle Initial)

**A. Maria I Diesel**

Mailing Address 1533 Johnnys Way

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		19		2016

City	State	Zip Code
West Chester	PA	19382-7851

Purpose of Disbursement  
Fundraising Consulting

003

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Amount of Each Disbursement this Period

2040.00
---------

☐ Memo Item

Transaction ID : B285D2A80E1C8415B82D

**B. Transaxt**Mailing Address 190 Monroe NW  
5th Fl

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		21		2016

City	State	Zip Code
Grand Rapids	MI	49503

Purpose of Disbursement  
CC Processing Fee

001

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Amount of Each Disbursement this Period

72.00
-------

☐ Memo Item

Transaction ID : B17552ABC33ED48B68AC

**c. Maria I Diesel**

Mailing Address 1533 Johnnys Way

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		26		2016

City	State	Zip Code
West Chester	PA	19382-7851

Purpose of Disbursement  
Fundraising Consulting

003

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Amount of Each Disbursement this Period

425.00
--------

☐ Memo Item

Transaction ID : B7AAE4697EA1547B09E4

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2537.00
---------

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 47 OF 66

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TOM MACARTHUR FOR CONGRESS INC.**

Full Name (Last, First, Middle Initial)

**A. The Prosper Group**Mailing Address 435 E Main St  
Room 250

City Greenwood State IN Zip Code 46143

Purpose of Disbursement  
Email Service

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		26		2016

Amount of Each Disbursement this Period

117.45

☐ Memo Item

Transaction ID : BA4947A7222B4447F97E

**B. New Jersey State Afl-cio**

Mailing Address 106 W State St

City Trenton State NJ Zip Code 08608-1102

Purpose of Disbursement  
Advertising-Print

004

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		28		2016

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Transaction ID : B4FB1F276E24D48E7829

**c. Paycycle**

Mailing Address 210 Portage Ave

City Palo Alto State CA Zip Code 94306

Purpose of Disbursement  
Payroll Taxes

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		01		2016

Amount of Each Disbursement this Period

75.42

☐ Memo Item

Transaction ID : B2E0F90B0991849DEA25

**SUBTOTAL** of Disbursements This Page (optional).....

692.87

**TOTAL** This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 48 OF 66

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TOM MACARTHUR FOR CONGRESS INC.**

Full Name (Last, First, Middle Initial)

**A. Paycycle**

Mailing Address 210 Portage Ave

City	State	Zip Code
Palo Alto	CA	94306

Purpose of Disbursement  
Payroll Taxes

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		01		2016

Amount of Each Disbursement this Period

640.23

☐ Memo Item

Transaction ID : B61750D1899124B09B0F

**B. Thomas Bonfonti**

Mailing Address 31 Barbara Ct

City	State	Zip Code
Waretown	NJ	08758

Purpose of Disbursement  
Payroll

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		01		2016

Amount of Each Disbursement this Period

1816.84

☐ Memo Item

Transaction ID : BF1C2B3D92AA648BA8A1

**c. Chris Griswold**

Mailing Address 9 East 5th St

City	State	Zip Code
Barnegat Light	NJ	08006

Purpose of Disbursement  
Payroll

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		01		2016

Amount of Each Disbursement this Period

855.20

☐ Memo Item

Transaction ID : B8BF21C2FA0074002BB8

**SUBTOTAL** of Disbursements This Page (optional).....

3312.27

**TOTAL** This Period (last page this line number only).....



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 49 OF 66

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TOM MACARTHUR FOR CONGRESS INC.**

Full Name (Last, First, Middle Initial)

**A. Thomas Bonfonti**

Mailing Address 31 Barbara Ct

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		01		2016

City	State	Zip Code
Waretown	NJ	08758

Amount of Each Disbursement this Period

818.22
--------

Purpose of Disbursement  
Payroll

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Transaction ID : B34574303B5304EFABF6

Full Name (Last, First, Middle Initial)

**B. Harrison Neely**

Mailing Address 41 Sayre Dr

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		01		2016

City	State	Zip Code
Princeton	NJ	08540

Amount of Each Disbursement this Period

2127.83
---------

Purpose of Disbursement  
Payroll

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Transaction ID : B493CB51852084D0DBB3

Full Name (Last, First, Middle Initial)

**c. Paycycle**

Mailing Address 210 Portage Ave

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		01		2016

City	State	Zip Code
Palo Alto	CA	94306

Amount of Each Disbursement this Period

1203.22
---------

Purpose of Disbursement  
Payroll Taxes

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Transaction ID : B0265C42D16FF4DE4A40

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

4149.22

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 50 OF 66

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TOM MACARTHUR FOR CONGRESS INC.**

Full Name (Last, First, Middle Initial)

**A. Ronald Gravino Consulting**

Mailing Address PO Box 225

City	State	Zip Code
Colonia	NJ	07067

Purpose of Disbursement  
Compliance

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		01		2016

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Transaction ID : BB963B2EF1C8543B485A

Full Name (Last, First, Middle Initial)

**B. Capitol Copy Service**

Mailing Address 116 W State St

City	State	Zip Code
Trenton	NJ	08608

Purpose of Disbursement  
Printing

003

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		02		2016

Amount of Each Disbursement this Period

481.08

☐ Memo Item

Transaction ID : B7608149628E5448A8B7

Full Name (Last, First, Middle Initial)

**C. Transxt**Mailing Address 190 Monroe NW  
5th Fl

City	State	Zip Code
Grand Rapids	MI	49503

Purpose of Disbursement  
CC Processing Fee

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		03		2016

Amount of Each Disbursement this Period

81.82

☐ Memo Item

Transaction ID : B80E22E218AB54A75BF7

**SUBTOTAL** of Disbursements This Page (optional).....

1562.90

**TOTAL** This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 51 OF 66

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

**TOM MACARTHUR FOR CONGRESS INC.**

Full Name (Last, First, Middle Initial)

**A. Fitzsimmons Communications**

Mailing Address PO Box 353

Date of Disbursement

M M	D D	Y Y Y Y
05	03	2016

City	State	Zip Code
Matawan	NJ	07747

Amount of Each Disbursement this Period

9124.00
---------

Purpose of Disbursement  
Phone Service

Category/ Type
-------------------

☐ Memo Item

Transaction ID : B457D088584414F9A914

Candidate Name

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Full Name (Last, First, Middle Initial)

**B. Turnkey Production LLC**

Mailing Address PO Box 122

Date of Disbursement

M M	D D	Y Y Y Y
05	05	2016

City	State	Zip Code
Cedar Grove	NJ	07009-0122

Amount of Each Disbursement this Period

8229.25
---------

Purpose of Disbursement  
Fundraising

003
-----

☐ Memo Item

Transaction ID : BC780C709F7DE4515A7F

Candidate Name

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Full Name (Last, First, Middle Initial)

**c. The Prosper Group**Mailing Address 435 E Main St  
Room 250

Date of Disbursement

M M	D D	Y Y Y Y
05	05	2016

City	State	Zip Code
Greenwood	IN	46143

Amount of Each Disbursement this Period

73.11
-------

Purpose of Disbursement  
Email Service

001
-----

☐ Memo Item

Transaction ID : B8C4B4F658DA841A9A91

Candidate Name

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

17426.36
----------

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 52 OF 66

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TOM MACARTHUR FOR CONGRESS INC.**

Full Name (Last, First, Middle Initial)

**A. ABBRUZZI & GIUNTA**

Mailing Address 3211 ROUTE 38

City	State	Zip Code
MT LAUREL	NJ	08054

Purpose of Disbursement  
Food/Beverage

003

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		06		2016

Amount of Each Disbursement this Period

1030.00

☐ Memo Item

Transaction ID : B68D78B69C23E44F7ABB

Full Name (Last, First, Middle Initial)

**B. Ring Llc**

Mailing Address PO Box 207

City	State	Zip Code
Dublin	OH	43017-0207

Purpose of Disbursement  
Phone Banks

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		06		2016

Amount of Each Disbursement this Period

287.54

☐ Memo Item

Transaction ID : B5F063EFCC5A641C6BDD

Full Name (Last, First, Middle Initial)

**C. Transxt**Mailing Address 190 Monroe NW  
5th Fl

City	State	Zip Code
Grand Rapids	MI	49503

Purpose of Disbursement  
CC Processing Fee

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		09		2016

Amount of Each Disbursement this Period

333.00

☐ Memo Item

Transaction ID : B15D9E5D5EE2F4C748F5

**SUBTOTAL** of Disbursements This Page (optional).....

1650.54

**TOTAL** This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 53 OF 66

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TOM MACARTHUR FOR CONGRESS INC.**

Full Name (Last, First, Middle Initial)

**A. AP Intego**Mailing Address 144 North Rd  
Ste 2050

City Sudbury State MA Zip Code 01776

Purpose of Disbursement  
Insurance

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		10		2016

Amount of Each Disbursement this Period

57.24
-------

☐ Memo Item

Transaction ID : B40B8D2DC03954D29859

**B. New York Athletic Club**

Mailing Address 180 Central Park South

City New York State NY Zip Code 10019-1562

Purpose of Disbursement  
Food/Beverage

003

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		11		2016

Amount of Each Disbursement this Period

3620.49
---------

☐ Memo Item

Transaction ID : B1E5B812AFF5847BD919

**c. Transxt**Mailing Address 190 Monroe NW  
5th Fl

City Grand Rapids State MI Zip Code 49503

Purpose of Disbursement  
CC Processing Fee

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		12		2016

Amount of Each Disbursement this Period

237.38
--------

☐ Memo Item

Transaction ID : BD60F6CF195AA47A0AEB

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3915.11

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 54 OF 66

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TOM MACARTHUR FOR CONGRESS INC.**

Full Name (Last, First, Middle Initial)

**A. TD Bank**

Mailing Address 1398 Highway 9

City	State	Zip Code
Old Bridge	NJ	08857

Purpose of Disbursement  
Bank Fee

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		17		2016

Amount of Each Disbursement this Period

53.97

☐ Memo Item

Transaction ID : B40596C17E35C4A4E908

**B. Hub International Northeast**Mailing Address 180 River Rd  
2nd Fl

City	State	Zip Code
Summit	NJ	07901

Purpose of Disbursement  
Insurance

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		18		2016

Amount of Each Disbursement this Period

1896.30

☐ Memo Item

Transaction ID : B40899771A6B94787BFB

**c. AP Intego**Mailing Address 144 North Rd  
Ste 2050

City	State	Zip Code
Sudbury	MA	01776

Purpose of Disbursement  
Insurance

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		18		2016

Amount of Each Disbursement this Period

9.48

☐ Memo Item

Transaction ID : BD7CBEC9AFF6D4BF7BCB

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1959.75

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 55 OF 66

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TOM MACARTHUR FOR CONGRESS INC.**

Full Name (Last, First, Middle Initial)

**A. Transaxt**Mailing Address 190 Monroe NW  
5th FlCity State Zip Code  
Grand Rapids MI 49503Purpose of Disbursement  
CC Processing Fee

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		18		2016

Amount of Each Disbursement this Period

216.00

☐ Memo Item

Transaction ID : B7D7CA793761E4984981

**B. Elizabeth Verrill**

Mailing Address 2 W Windsor Ave

City State Zip Code  
Alexandria VA 22301-1514Purpose of Disbursement  
Debt Repayment: Food/Beverage

003

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2016

Amount of Each Disbursement this Period

3006.90

☐ Memo Item

Transaction ID : BA65DB07C0E1B48D8995

**c. Acqua AI 2**

Mailing Address 212 7th St SE

City State Zip Code  
Washington DC 20003-4311Purpose of Disbursement  
FOOD/BEVERAGE

003

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		07		2016

Amount of Each Disbursement this Period

3006.90

☒ Memo Item

Transaction ID : BA66C5F5748A3492893C

**SUBTOTAL** of Disbursements This Page (optional).....

3222.90

**TOTAL** This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 56 OF 66

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TOM MACARTHUR FOR CONGRESS INC.**

Full Name (Last, First, Middle Initial)

**A. Bridge Majority LLC**

Mailing Address 2 W Windsor Ave

City	State	Zip Code
Alexandria	VA	22301

Purpose of Disbursement  
Debt Repayment: Fundraising

003

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2016

Amount of Each Disbursement this Period

10000.00

☐ Memo Item

Transaction ID : BC2679493F52E4E5990A

**B. Robin Danley**

Mailing Address 515 W Cheltenham Ave

City	State	Zip Code
Philadelphia	PA	19144-4414

Purpose of Disbursement  
Phone Service

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		01		2016

Amount of Each Disbursement this Period

578.50

☐ Memo Item

Transaction ID : B2EB76A6D5BF04DA09A3

**C. AT&T**

Mailing Address 255 Route 37 E

City	State	Zip Code
Toms River	NJ	08753

Purpose of Disbursement  
Phone Service

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		01		2016

Amount of Each Disbursement this Period

578.50

☒ Memo Item

Transaction ID : B36A3D9718C2745B7B94

**SUBTOTAL** of Disbursements This Page (optional).....

10578.50

**TOTAL** This Period (last page this line number only).....



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 57 OF 66

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TOM MACARTHUR FOR CONGRESS INC.**

Full Name (Last, First, Middle Initial)

**A. Elizabeth Verrill**

Mailing Address 2 W Windsor Ave

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		12		2016

City	State	Zip Code
Alexandria	VA	22301-1514

Amount of Each Disbursement this Period

2600.00
---------

Purpose of Disbursement  
Food/Beverage

003

☐ Memo Item

Candidate Name

Category/  
Type

Transaction ID : BFCDA7CCBDA4F41F993B

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**B. Osteria Morini**

Mailing Address 301 Water St SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		12		2016

City	State	Zip Code
Washington	DC	20003-3734

Amount of Each Disbursement this Period

2600.00
---------

Purpose of Disbursement  
Food/Beverage

003

☒ Memo Item

Candidate Name

Category/  
Type

Transaction ID : BC36986809C604DC8B11

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**C. American Express**

Mailing Address PO Box 1270

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		29		2016

City	State	Zip Code
Newark	NJ	07101

Amount of Each Disbursement this Period

2802.25
---------

Purpose of Disbursement  
Credit Card

001

☐ Memo Item

Candidate Name

Category/  
Type

Transaction ID : B6B06D57D82224D6B8D0

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

5402.25

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 58 OF 66

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TOM MACARTHUR FOR CONGRESS INC.**

Full Name (Last, First, Middle Initial)

**A. VoterTrove**Mailing Address 3180 18th St  
#100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Research

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
04	29	2016

Amount of Each Disbursement this Period

312.50

☒ Memo Item

Transaction ID : B5CBD993EBE1B44E7A0F

**B. Capitol Hill Club**

Mailing Address 300 1st St SE

City Washington State DC Zip Code 20003-1801

Purpose of Disbursement  
Food/Beverage

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
04	29	2016

Amount of Each Disbursement this Period

1255.72

☒ Memo Item

Transaction ID : B007BB853AA2A499D967

**c. Bull Feathers**

Mailing Address 410 1st St SE

City Washington State NJ Zip Code 20003

Purpose of Disbursement  
Food/Beverage

003

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
04	29	2016

Amount of Each Disbursement this Period

54.47

☒ Memo Item

Transaction ID : BC6473968979642359A6

**SUBTOTAL** of Disbursements This Page (optional).....

0.00

**TOTAL** This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 59 OF 66

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TOM MACARTHUR FOR CONGRESS INC.**

Full Name (Last, First, Middle Initial)

**A. Shoprite**

Mailing Address 445 Atlantic City Blvd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		29		2016

City	State	Zip Code
Bayville	NJ	08721

Amount of Each Disbursement this Period

16.31
-------

Purpose of Disbursement  
Office Supplies

001

Candidate Name

Category/  
Type☒ Memo Item

Transaction ID : B0908B9F4245241C59EF

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B. Wall Street Journal**

Mailing Address 84 Second Ave

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		29		2016

City	State	Zip Code
Chicopee	MA	01020-4625

Amount of Each Disbursement this Period

28.99
-------

Purpose of Disbursement  
Subscription

001

Candidate Name

Category/  
Type☒ Memo Item

Transaction ID : B2C19CEFE1B81496D878

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**C. AT&T**

Mailing Address 255 Route 37 E

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		29		2016

City	State	Zip Code
Toms River	NJ	08753

Amount of Each Disbursement this Period

122.08
--------

Purpose of Disbursement  
Phone Service

001

Candidate Name

Category/  
Type☒ Memo Item

Transaction ID : BB92C1116CAA2494D89F

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 60 OF 66

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TOM MACARTHUR FOR CONGRESS INC.**

Full Name (Last, First, Middle Initial)

**A. USPS**

Mailing Address 501 Benigno Blvd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		29		2016

City	State	Zip Code
Bellmawr	NJ	08031-2597

Amount of Each Disbursement this Period

141.00
--------

Purpose of Disbursement  
Postage

001

☒ Memo Item

Candidate Name

Category/  
Type

Transaction ID : BF863D2E3595F40DDB06

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
State:	District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial)

**B. La Fontana**

Mailing Address 375 Drum Point Rd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		29		2016

City	State	Zip Code
Brick	NJ	08723-6818

Amount of Each Disbursement this Period

530.06
--------

Purpose of Disbursement  
Food/Beverage

001

☒ Memo Item

Candidate Name

Category/  
Type

Transaction ID : B472F667C36934C86928

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
State:	District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial)

**c. Shoprite**

Mailing Address 445 Atlantic City Blvd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		29		2016

City	State	Zip Code
Bayville	NJ	08721

Amount of Each Disbursement this Period

33.98
-------

Purpose of Disbursement  
Office Supplies

001

☒ Memo Item

Candidate Name

Category/  
Type

Transaction ID : B0514B41D9F634A1CB4E

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
State:	District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00
------

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 61 OF 66

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TOM MACARTHUR FOR CONGRESS INC.**

Full Name (Last, First, Middle Initial)

**A. USPS**

Mailing Address 501 Benigno Blvd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		29		2016

City	State	Zip Code
Bellmawr	NJ	08031-2597

Amount of Each Disbursement this Period

81.60
-------

Purpose of Disbursement  
Postage

001

☒ Memo Item

Candidate Name

Category/  
Type

Transaction ID : BEF3766C2EDA44EBA8A3

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**B. American Express**

Mailing Address PO Box 1270

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		25		2016

City	State	Zip Code
Newark	NJ	07101

Amount of Each Disbursement this Period

2206.91
---------

Purpose of Disbursement  
Credit Card

001

☐ Memo Item

Candidate Name

Category/  
Type

Transaction ID : BA14D9F36F2FD40538E2

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**c. Union League**

Mailing Address 140 S Broad St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		25		2016

City	State	Zip Code
Philadelphia	PA	19102-3003

Amount of Each Disbursement this Period

2206.91
---------

Purpose of Disbursement  
Food/Beverage

003

☒ Memo Item

Candidate Name

Category/  
Type

Transaction ID : BB499508503C44CC5B93

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2206.91

93729.61

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 62 OF 66

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**TOM MACARTHUR FOR CONGRESS INC.**

Full Name (Last, First, Middle Initial)

**A. Ocean County Federation Of Republican Women**

Mailing Address 14 Seagull Pt

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		08		2016

City	State	Zip Code
Bayville	NJ	08721-3533

Amount of Each Disbursement this Period

275.00
--------

Purpose of Disbursement  
Contribution

011

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

☐ Memo Item

Transaction ID : B0BC24E69B20D453DBF8

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

--

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:	House	Disbursement For:
	Senate	
	President	
		<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

--

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:	House	Disbursement For:
	Senate	
	President	
		<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

275.00

275.00

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 63 OF 66

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : C4BE5AE08657F4491B89

TOM MACARTHUR FOR CONGRESS INC.

LOAN SOURCE Full Name (Last, First, Middle Initial) **PERSONAL FUNDS** ☐ Memo Item

Thomas Macarthur

Election: 2014

☐ Primary☒ General☐ Other (specify) ▼

Mailing Address

77 EAST WATER STREET #24

City

State

ZIP Code

TOMS RIVER

NJ

08753

Original Amount of Loan

1000000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

250000.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
10 10 / 2014

Date Due

M M / D D / Y Y Y Y  
None

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

250000.00

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 64 OF 66

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : CAC5E823F153B4AA5A5F

TOM MACARTHUR FOR CONGRESS INC.

LOAN SOURCE Full Name (Last, First, Middle Initial) **PERSONAL FUNDS** ☐ Memo Item

Thomas Macarthur

Election: 2014

☐ Primary☒ General☐ Other (specify) ▼

Mailing Address

77 EAST WATER STREET #24

City

State

ZIP Code

TOMS RIVER

NJ

08753

Original Amount of Loan

1000000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

250000.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
03 / 31 / 2014

Date Due

M M / D D / Y Y Y Y  
None

Interest Rate

0.00 % (apr)

Secured:

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

250000.00

**TOTALS** This Period (last page in this line only)..... ►

500000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.



**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 65 OF 66

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**TOM MACARTHUR FOR CONGRESS INC.**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Thomas Macarthur**

Nature of Debt (Purpose):

Candidate Travel/ Meeting Expense

Mailing Address 77 EAST WATER STREET #24

City State

Zip Code

TOMS RIVER

NJ

08753

Outstanding Balance Beginning This Period

1246.74

Transaction ID : D9D209E9B02574122899

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1246.74

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Thomas Macarthur**

Nature of Debt (Purpose):

Candidate Travel/Meeting Expense

Mailing Address 77 EAST WATER STREET #24

City State

Zip Code

TOMS RIVER

NJ

08753

Outstanding Balance Beginning This Period

1945.15

Transaction ID : DD064045D9E2F47B5AB8

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1945.15

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Thomas Macarthur**

Nature of Debt (Purpose):

Candidate Travel/Meeting Expense

Mailing Address 77 EAST WATER STREET #24

City State

Zip Code

TOMS RIVER

NJ

08753

Outstanding Balance Beginning This Period

3038.67

Transaction ID : D7B6C2FF89CAE48589D6

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3038.67

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

6230.56

2) **TOTALS** This Period (last page this line number only) ..... ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 66 OF 66

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**TOM MACARTHUR FOR CONGRESS INC.**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Bridge Majority LLC**

Nature of Debt (Purpose):

Fundraising

Mailing Address 2 W Windsor Ave

City State

Zip Code

Alexandria

VA

22301

Outstanding Balance Beginning This Period

10000.00

Transaction ID : D78EA3695A60147BFBD5

Amount Incurred This Period

0.00

Payment This Period

10000.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Elizabeth Verrill**

Nature of Debt (Purpose):

Food/Beverage

Mailing Address 2 W Windsor Ave

City State

Zip Code

Alexandria

VA

22301-1514

Outstanding Balance Beginning This Period

3006.90

Transaction ID : DA7F1DB71B9684776AB4

Amount Incurred This Period

0.00

Payment This Period

3006.90

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

0.00

2) **TOTALS** This Period (last page this line number only) ..... ▶

6230.56

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

500000.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

506230.56